BEST AVAILABLE COPY

pplication or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Q64332

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE (OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			8					RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		В	ASIC FEE	355.00	OR	BASIC FEE	· 710.00	
TOTAL CHARGEABLE CLAIMS			13 minus 20=		. 0			X\$ 9=		OR	X\$18=	٠,	
INDEPENDENT CLAIMS			2 minus 3 =		• 0			X40=		OR	X80=		
MU	LTIPLE DEPENI	DENT CLAIM PI	RESENT					+135=		OR	+270=	276	
* If	the difference	in column 1 is	less than zero, enter "0" in column 2			olumn 2	<u> </u>	TOTAL		OR	TOTAL	480	
	CI	AIMS AS A	MENDED - PART II								OTHER		
	- Indiana	(Column 1)	(Column 2) (Column			(Column 3)		SMALL ENTITY C			R SMALL ENTITY		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT				PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***	T OL A114	=		X40=		OR	X80=		
L	FIRST PRESE	NTATION OF M	OLTIPLE DEF	ENDEN	CLAIM			+135=		OR	+270=		
							L	TOTAL	•		TOTAL ADDIT. FEE		
		(Column 1)		(Colu	ımn 2)	(Column 3)	AL	DIT. FEE	·		ADDII. FEE		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGI NUN PREVI	HEST	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X40=		OR	X80=		
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM] -	+135=		1	+270=		
		•					L	TOTAL		OR	TOTAL		
								DIT. FEE		OR	ADDIT. FEE	<u> </u>	
_		(Column 1) CLAIMS			ımn 2) HEST	(Column 3)	1 –					T	
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREV	MBER IOUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X40=		OR	X80=		
	FIRST PRESE	IULTIPLE DE	EPENDENT CLAIM		1	┚┝	+135=		OR	+270=			
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									4	. TOTAL		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													